STATE OF WISCONSIN, CIR	CUIT COURT,	COUNTY	For Official Use	
IN THE MATTER OF THE GUARDIANSHIP OF		Resignation of Guardian  Person  Estate		
Date of Birth		Case No		
I,				
I request that the court accept my resignation as guardian.  I understand that my resignation is not effective until a successor guardian is appointed and I am discharged as guardian. I also understand that my resignation as guardian of the estate is not effective until my final account has been approved and a receipt from the successor guardian for all assets has been filed.				
		Signature of Gu	Signature of Guardian	
		Name Printed or T	Name Printed or Typed	
		Address	Address	
Name of Attorney  Address				
		Date	Date	
Telephone Number	Bar Number			